

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

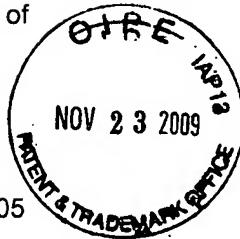
In re Patent Application of

DOUGLAS et al.

Serial No. 10/554,266

Filed: October 25, 2005

Title: EXCIPLEXES



Atty MJW-39-317

Dkt.

C# M#

TC/A.U.

1634

Examiner: Johannsen, D.B.

Date: November 23, 2009

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

**RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT**

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

 **Correspondence Address Indication Form Attached.****Fees are attached as calculated below:**

Total effective claims after amendment previously paid for	0 20	minus highest number (at least 20) =	0 0	x \$52.00	\$0.00 (1202)/\$0.00 (2202)	\$ 0.00	
Independent claims after amendment previously paid for	0 3	minus highest number (at least 3) =	0 0	x \$220.00	\$0.00 (1201)/\$0.00 (2201)	\$ 0.00	
If proper multiple dependent claims now added for first time, (ignore improper); add							
						\$390.00 (1203)/\$0.00 (2203)	\$ 0.00
Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s)							
One Month Extension \$130.00 (1251)/\$0.00 (2251)							
Two Month Extensions \$490.00 (1252)/\$0.00 (2252)							
Three Month Extensions \$1110.00 (1253)/\$0.00 (2253)							
Four Month Extensions \$1730.00 (1254)/\$0.00 (2254)							
Five Month Extensions \$2350.00 (1255)/\$0.00 (2255)							
Terminal disclaimer enclosed, add						\$ 0.00	
						\$140.00 (1814)/ \$0.00 (2814)	\$ 0.00
<input type="checkbox"/> Applicant claims "small entity" status. <input type="checkbox"/> Statement filed herewith							
Rule 56 Information Disclosure Statement Filing Fee						\$180.00 (1806)	\$ 0.00
Assignment Recording Fee						\$40.00 (8021)	\$ 0.00
Other:						\$ 0.00	
						<b>TOTAL FEE</b>	<b>\$ 0.00</b>

 **CREDIT CARD PAYMENT FORM ATTACHED.**

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.

901 North Glebe Road, 11th Floor  
 Arlington, Virginia 22203-1808  
 Telephone: (703) 816-4000  
 Facsimile: (703) 816-4100  
 MJW:tat

NIXON & VANDERHYE P.C.  
 By Atty: Mary J. Wilson, Reg. No. 32,955

Signature: Mary J. Wilson